1340633

## FORM D

#### UNITED STATES

# SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

SEC Mail Mail Processing Section

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR

Washington, DC 106

FEB 15 2008

UNIFORM LIMITED OFFERING EXEMPTION

OMB AP	PROVAL
OMB Number:	3235-0076
Expires:	April 30, 2008
Estimated averag hours per respo	
SEC US	E ONLY
Prefix	Serial
DATE RI	ECEIVED

Name of Offering ( check if this is an amendment and name has changed, and indicate change.)  Issuance of Subordinated Convertible Promissory Notes and all underlying securities	
Filing Under (Check box(es) that apply):  Rule 504 Rule 505 Rule 506  Type of Filing:  New Filing Amendment	Section 4(6) ULOE
A. BASIC IDENTIFICATION DATA	
1. Enter the information requested about the issuer  Name of Issuer ( check if this is an amendment and name has changed, and indicate change.)  NetEffect, Inc.	08040031
Address of Executive Offices (Number and Street, City, State, Zip Code) 9211 Waterford Centre Blvd., Suite 100, Austin, TX, 78758	Telephone Number (Including Area Code) (512) 302.0002
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)  n/a	Telephone Number (Including Area Code)
Brief Description of Business	
Fabless semiconductor manufacturer	PROCESSED
Type of Business Organization  Corporation  Ilimited partnership, already formed  business trust  Ilimited partnership, to be formed  other	(please specify): THE 2 5 2008
Actual or Estimated Date of Incorporation or Organization:    Month   Year	FINANCIAL Actual Estimated
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service Abbreviation for St CN for Canada; FN for other foreign jurisdiction)	ate:

### **GENERAL INSTRUCTIONS**

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ΑT	7	Ю.	N		T	Λ	N.	•
$A_{\mathbf{J}}$	LI.	C.	١٦	Ί		U	1	

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

> Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

		A.	BASIC IDI	ENTII	FICATION DATA				,
<ul> <li>Each beneficial own</li> <li>Each executive office</li> </ul>	e issuer, if the issuer h	as been of vote or porate iss	dispose, or direct the suers and of corporat	vote	or disposition of, 10%				securities of the issuer; and
Check Box(es) that Apply:	Promoter		Beneficial Owner	Ø	Executive Officer	$\boxtimes$	Director		General and/or Managing Partner
Full Name (Last name first, if	individual)								
Maule, Charles R.									
Business or Residence Addre	ss (Number and Stre	et, City,	State, Zip Code)						
c/o NetEffect, Inc., 9211 Wa	terford Centre Blv	l., Suite	100, Austin, TX	78758	3				
Check Box(es) that Apply:	Promoter		Beneficial Owner	☒	Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, it	findividual)								
Hulett, Terry Business or Residence Addre	ce (Number and Stree	et City	State 7in Code		. •				
c/o NetEffect, Inc., 9211 Wa				78758	1				
	Promoter		Beneficial Owner	$\square$	Executive Officer	$\overline{}$	Director	$\overline{}$	General and/or
Check Box(es) that Apply:			Beneficial Owner	<u>——</u>	Executive Officer		Director	<u> </u>	Managing Partner
Full Name (Last name first, i	f individual)								
Senders, Robert C.									
Business or Residence Addre	•	•	- '						
c/o NetEffect, Inc., 9211 Wa	<u> </u>			78758					· · · · · · · · · · · · · · · · · · ·
Check Box(es) that Apply:	Promoter	⊠ :	Beneficial Owner		Executive Officer	<u> </u>	Director	<u> </u>	General and/or Managing Partner
Full Name (Last name first, i	f individual)								
Austin Ventures VII, L.P.							,		<u> </u>
Business or Residence Addre	ss (Number and Stre	et, City,	State, Zip Code)						·
300 W. 6th Street, Suite 230	0, Austin, TX 7870	1, attn:	Clark Jerrigan		,				
Check Box(es) that Apply:	Promoter	X	Beneficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, i	f individual)								•
Infinity Capital Venture Fu	nd 1999, L.P. and r	elated fo	unds						
Business or Residence Addre	•			n					
Check Box(es) that Apply:	Promoter		Beneficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, i	f individual)							,	
Granite Ventures, L.P.					······································	•			
Business or Residence Addre	•								
c/o Granite Ventures, LLC,	<del></del>			CA 94	104 Attn: Sam Ki	ngslar			; ·
Check Box(es) that Apply:	Promoter		Beneficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, i	findividual)				-				
TI Ventures III, L.P.		<u> </u>	•	•				•	
Business or Residence Addre	ss (Number and Stree	t, City,	State, Zip Code)					٠.	• •
c/o Granite Ventures, LLC,	One Bush Street, 13	3 <sup>th</sup> Floor	r, San Francisco, (	A 94	104 Attn: Sam Kir	gslan	đ		

4142566\_1.DOC) SEC 1972 (2-97) Page 2 of 10

Check Box(es) that Apply:		Promoter	$\boxtimes$	Beneficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, i	f indiv	idual)		,						
TL Ventures V, L.P. and re										
Business or Residence Addre			t, City	, State, Zip Code)						
435 Devon Park Dr., 700 B	•		-	-	10					
Check Box(es) that Apply:		Promoter	Ø	Beneficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, i	f indiv	idual)	-							
JatoTech Ventures, L.P. an										
Business or Residence Addre			t, City	, State, Zip Code)			,	-		
301 Congress Avenue, Suite					Ω					•
Check Box(es) that Apply:		Promoter	Ø	Beneficial Owner		Executive Officer	$\boxtimes$	Director		General and/or
		,				<u></u>		· · · · · · · · · · · · · · · · · · ·		Managing Partner
Full Name (Last name first, i	f indiv	idual)			•					
Jernigan, Clark										
Business or Residence Addre										
c/o Austin Ventures, 300 V	V. 6th S	treet, Ste. 230	0, Aus	tin, TX 78701		•				
Check Box(es) that Apply:		Promoter	×	Beneficial Owner		Executive Officer	×	Director		General and/or Managing Partner
Full Name (Last name first,	f indiv	idual)								
DiNino, Mark										
Business or Residence Addre	ss (Nu	mber and Stree	t, City	, State, Zip Code)				•	-	
c/o TL Ventures, 435 Devo	n Park	Dr., 700 Buile	ding, V	Wayne, PA, 19087		•				
Check Box(es) that Apply:		Promoter	$\boxtimes$	Beneficial Owner		Executive Officer	Ø	Director		General and/or Managing Partner
Full Name (Last name first,	if indiv	idual)								<u> </u>
Graham, Bruce		•							•	
Business or Residence Addre	ess (Nu	mber and Stree	t, City	, State, Zip Code)						
c/o Infinity, 100 Hamilton	4ve., S	uite 400, Palo	Alto,	CA 94301						
								•		•
Check Box(es) that Apply:		Promoter	X	Beneficial Owner		Executive Officer	Ø	Director		General and/or Managing Partner
Full Name (Last name first,	f indiv	idual)								mueRiiR i ai aici
Kingsland, Sam	T MINIA	·ouerj								
Business or Residence Addre		mber and Stree	et City	State Zin Code)					- <u></u>	
c/o Granite Ventures, LLC	-				CA 94	104		•		
							F.7			
Check Box(es) that Apply:	⊔ —–	Promoter	⋈	Beneficial Owner		Executive Officer	<u> </u>	Director		General and/or Managing Partner
Full Name (Last name first,	f indiv	idual)								•
Thirion, Walter		<u> </u>								
Business or Residence Address			•	• •						
c/o JatoTech, 301 Congress	Ave.,	Ste. 2050, Aus	tin, T	X 78701						
Check Box(es) that Apply:		Promoter	×	Beneficial Owner		Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first,	f indiv	idual)				•				
Majors, Steve										
Business or Residence Addre	ss (Nu	mber and Stree	t, City	, State, Zip Code)						
4100 House of York, Austin	, TX,	78730								

4142566\_1.DOC) SEC 1972 (2-97) Page 3 of 10

Check Box(es) that Apply:		Promoter		Beneficial Owner	☒	Executive Officer		Director,		General and/or Managing Partner
Full Name (Last name first, it	indivi	dual)								
Hagerman, John								·		· · · · · · · · · · · · · · · · · · ·
Business or Residence Addre	ss (Nu	mber and Stree	t, City,	, State, Zip Code)						
c/o NetEffect, Inc., 9211 Wa	terfor	d Centre Blvd	l., Suit	e 100, Austin, TX	78758			<u>.                                    </u>		
Check Box(es) that Apply:		Promoter		Beneficial Owner	☒	Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, i	f indivi	dual)		· · · · · · ·					, .	
Sommers, Dave										
Business or Residence Addre	ss (Nu	mber and Stree	t, City	, State, Zip Code)						•
c/o NetEffect, Inc., 9211 Wa	terfor	d Centre Blvo	I., Suit	e 100, Austin, TX	78758	3		. <u>.</u>		···
Check Box(es) that Apply:		Promoter		Beneficial Owner	☒	Executive Officer		Director		General and/or Managing Partner
Full Name (Last name first, i	f indiv	idual)								
Maxwell, Bill								<u>,</u>		
Business or Residence Addre	ss (Nu	mber and Stree	t, City	, State, Zip Code)						•
c/o NetEffect, Inc., 9211 W	terfor	d Centre Blve	i., Suit	e 100, Austin, TX	78758	3				
Check Box(es) that Apply:		Promoter		Beneficial Owner		Executive Officer	×	Director		General and/or Managing Partner
Full Name (Last name first, i	f indiv	idual)								
Seth, Rohit										
Business or Residence Addre	ss (Nu	mber and Stre	et, City	, State, Zip Code)						•
c/o Duchossois Technology	Partne	ers L.L.C.,845	Larci	Ave., Elmhurst, l	L, 601	26				
Check Box(es) that Apply:		Promoter		Beneficial Owner	×	Executive Officer	X	Director		General and/or Managing Partner
Full Name (Last name first,	f indiv	idual)			-			<del>-</del>	,	
Farnham, Ray										
Business or Residence Addre	ess (Nu	mber and Stre	et, City	, State, Zip Code)						
c/o NetEffect, Inc., 9211 W	aterfor	d Centre Blv	d., Suit	te 100, Austin, TX	7875	8				

SEC 1972 (2-97) Page 4 of 10

				В.	1111 010	VALIONA	BOUT OF	Litario			Yes	No
. Has the	issuer sold,	or does the is	suer intend to									Œ
					ilso in A <del>ppe</del> n					•		
. What is	the minimur	n investment	that will be	accepted fro	m any indivi	dual?	***************************************				\$	n/a_
. Does th	ne offering pe	rmit joint ow	mership of a	single unit?	.,						Yes ⊠	N <sub>0</sub>
remune person than fiv dealer o		icitation of pubroker or dea to be listed a	urchasers in c ler registered ure associated	onnection w with the SE	rith sales of se C and/or with	curities in th a state or st	e offering. If ates, list the n	a person to b came of the br	e listed is an oker or deal	associated er. If more		
full Name (I	Last name fire	st, if individu	al)									
Business or I	Residence Ad	ldress (Numb	er and Street	, City, State	, Zip Code)				<del>-</del>			
Name of Ass	sociated Brok	er or Dealer				<u> </u>	<u>.</u>	<del></del>				
	ich Person L								·····			
(Check *A	All States" or	check individ	duals States)	••••••••							∐ Al	l States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	, [CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[1D]
(IL)	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[[MA]]	[Mi]	[MN]	[MS]	[MO]
[MT]	(NE)	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	(OK)	(OR)	[PA]
[141.1.]												
[RI] Full Name (I	[SC]  Last name fire  Residence Ad		[TN]	[TX]	(UT)	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
[RI] Full Name (I Business or I	Last name fir Residence Ad sociated Brok	st, if individu	[TN]	t, City, State	, Zip Code)		[VA]	[WA]	(WV)		[WY]	[PR]
[RI] Full Name (I Business or I Name of Ass	Last name fir Residence Ad	st, if individu	[TN]  per and Street	t, City, State	, Zip Code)					.,,		[PR]
[RI] Full Name (I Business or I Name of Ass States in Wh	Last name fire.  Residence Acceptated Brokenich Person L All States" or	ddress (Number or Dealer isted Has Sol	[TN]  per and Street  icited or Interduals States)	t, City, State	it Purchasers					.,	A	11 States
[RI] Full Name (I Business or I Name of Ass States in Wh (Check */	Last name fir Residence Ad sociated Brok nich Person L All States" or [AK]	st, if individu ddress (Numb ter or Dealer isted Has Sol check individ	[TN] per and Street icited or Inte	nds to Solic	it Purchasers	(CT)	[DE]	(DC)	(FL)	[GA]	A	II States
[RI] Full Name (I Business or I Name of Ass States in Wh (Check */ [AL] [IL]	Residence Adsociated Brok	ddress (Number or Dealer isted Has Sol check individual)	icited or Inteduals States) [AR] [KS]	nds to Solic	it Purchasers  [CO]	(CT)	[DE]	(DC) [[MA]	(FL) {MI]	[GA]	[HI] [MS]	II States {ID} {MO}
[RI] Full Name (I Business or I Name of Ass States in Wh (Check */	Last name fir Residence Ad sociated Brok nich Person L All States" or [AK]	st, if individu ddress (Numb ter or Dealer isted Has Sol check individ	[TN] per and Street icited or Inte	nds to Solic	it Purchasers	(CT)	[DE]	(DC)	(FL)	[GA]	A	II States
[RI] Full Name (I Business or I Name of Ass States in Wh (Check */ [AL] [IL] [MT] [RI]	Residence Adsociated Brokenich Person L All States* or [AK] [IN]	st, if individual dress (Number or Dealer isted Has Sol check individual [AZ] [IA] [NV] [SD]	icited or Inteduals States) [AR] [KS] [NH]	it, City, State	it Purchasers  [CO]  [LA]  [NM]	[CT] [ME] [NY]	[DE] [MD] [NC]	(DC) [[MA] [ND]	(FL) {MI) {OH]	[GA] [MN] [OK]	(HI] (MS) (OR)	Il States {ID} [MO] [PA]
[RI] Full Name (I Business or I Name of As: States in Wh (Check */ [AL] [IL] [MT] [RI] Full Name (I	Residence Adsociated Brokenich Person L All States" or [AK] [IN] [NE] [SC]	st, if individual dress (Number or Dealer isted Has Sol check individual [IA] [NV] [SD]	icited or Inteduals States) [AR] [KS] [NH] [TN]	(CA)  [KY]  [TX]	it Purchasers  [CO]  [LA]  [NM]	[CT] [ME] [NY]	[DE] [MD] [NC]	(DC) [[MA] [ND]	(FL) {MI) {OH]	[GA] [MN] [OK]	(HI] (MS) (OR)	Il States {ID} [MO] [PA]
[RI] Full Name (I Business or I Name of Ass States in Wh (Check */ [AL] [IL] [MT] [RI] Full Name (I Business or I	Residence Adsociated Brokenich Person L All States" or [AK] [IN] [NE] [SC]	st, if individu	icited or Inteduals States) [AR] [KS] [NH] [TN]	(CA)  [KY]  [TX]	it Purchasers  [CO]  [LA]  [NM]	[CT] [ME] [NY]	[DE] [MD] [NC]	(DC) [[MA] [ND]	(FL) {MI) {OH]	[GA] [MN] [OK]	(HI] (MS) (OR)	Il States {ID} [MO] [PA]
[RI] Full Name (I Business or I Name of Ass States in Wh (Check */ [AL] [IL] [MT] [RI] Full Name (I Business or I Name of Ass	Residence Adsociated Brokenich Person L. All States" or [AK] [IN] [NE] [SC]  Last name fir	st, if individual didress (Number or Dealer isted Has Sol check individual [IA] [NV] [SD] st, if individual didress (Number or Dealer	icited or Inteduals States) [AR] [KS] [NH] [TN]	(CA)  [NJ]  [TX]	it Purchasers  [CO]  [LA]  [NM]  [UT]	(CT) (ME) (NY) (VT)	[DE] [MD] [NC]	(DC) [[MA] [ND]	(FL) {MI) {OH]	[GA] [MN] [OK]	[HI] [MS] [OR] [WY]	II States  {ID}  [MO]  [PA]  [PR]
[RI]  Full Name (I Business or I Name of Ass States in Wh (Check "/ [AL] [IL] [MT] [RI]  Full Name (I Business or I Name of Ass States in Wh	Residence Adsociated Brokenich Person L All States" or [AK] [IN] [NE] [SC]  Last name fir  Residence Adsociated Brokenich Person L All States and Company and Comp	st, if individual dress (Number or Dealer isted Has Sol check individual (NV) (SD) st, if individual dress (Number or Dealer isted Has Sol	icited or Inteduals States) [AR] [KS] [NH] [TN]  al)  per and Street	(CA) [KY] [TX]	it Purchasers  [CO]  [LA]  [NM]  [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	(DC) [[MA] [ND] [WA]	(FL) {MI) {OH]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	II States {ID} [MO] [PA] [PR]
[RI]  Full Name (I Business or I Name of Ass States in Wh (Check "/ [AL] [IL] [MT] [RI]  Full Name (I Business or I Name of Ass States in Wh (Check "/ [AL]	Residence Adsociated Brokenich Person L All States" or [AK] [IN] [SC]  Last name fir  Residence Adsociated Brokenich Person L	st, if individual dress (Number or Dealer isted Has Sol check individual (NV) (SD) st, if individual dress (Number or Dealer isted Has Sol	icited or Inte duals States) [AR] [KS] [NH] [TN]  eer and Street	(CA) [KY] [TX]	it Purchasers  [CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	(DC) [[MA] [ND] [WA]	(FL) {MI) {OH]	[GA] [MN] [OK] [WI)	[HI] [MS] [OR] [WY]	II States {ID} [MO] [PA] [PR]
[RI] Full Name (I Business or I Name of Ass States in Wh (Check */ [IL] [MT] [RI] Full Name (I Business or I Name of Ass States in Wh (Check */ [AL] [IL] [IL]	Residence Adsociated Brokenich Person L All States" or [AK] [NE] [SC]  Last name fir  Residence Adsociated Brokenich Person L All States" or [AK] [IN]	st, if individual dress (Number or Dealer isted Has Sol [AZ] [IA] [SD] st, if individual dress (Number or Dealer isted Has Sol check individual dress (Number or Dealer isted Has Sol check individual dress (Number or Dealer isted Has Sol check individual dress (Number or Dealer isted Has Sol check individual dress (Number or Dealer isted Has Sol check individual dress (Number or Dealer isted Has Sol check individual dress (Number or Dealer isted Has Sol check individual dress (Number or Dealer isted Has Sol check individual dress (Number or Dealer isted Has Sol check individual dress (Number or Dealer isted Has Sol check individual dress (Number or Dealer isted Has Sol check individual dress (Number or Dealer isted Has Sol check individual dress (Number or Dealer isted Has Sol check individual dress (Number or Dealer isted Has Sol check individual dress (Number or Dealer isted Has Sol check individual dress (Number or Dealer isted Has Sol check individual dress (Number or Dealer isted Has Sol check individual dress (Number or Dealer isted Has Sol check individual dress (Number or Dealer isted Has Sol check individual dress (Number or Dealer isted Has Sol check individual dress (Number or Dealer isted Has Sol check individual dress (Number or Dealer isted Has Sol check individual dress (Number or Dealer isted Has Sol check individual dress (Number or Dealer isted Has Sol check individual dress (Number or Dealer isted Has Sol check individual dress (Number or Dealer isted Has Sol check individual dress (Number or Dealer isted Has Sol check individual dress (Number or Dealer isted Has Sol check individual dress (Number or Dealer isted Has Sol check individual dress (Number or Dealer isted Has Sol check individual dress (Number or Dealer isted Has Sol check individual dress (Number or Dealer isted Has Sol check individual dress (Number or Dealer isted Has Sol check individual dress (Number or Dealer isted Has Sol check individual dress (Number or Dealer isted Has Sol check individual dress (Number or Dealer isted Ha	icited or Inte duals States) [AR] [KS] [NH] [TN]  al)  er and Street duals States) [AR] [KS] [KS] [KS]	(CA) [KY] [TX]  Take, City, State  (CA) [KY] [TX]	it Purchasers  [CO] [LA] [NM] [UT]  Zip Code)  it Purchasers  [CO] [LA]	(CT) (ME) (NY) (VT)	[DE] [MD] [VA]	(DC) [[MA] [WA]	(FL) (MI) (OH) (WV)	[GA] [MN] [WI]	[HI] [MS] [OR] [WY]	II States {ID} {MO} [PA] [PR]
[RI]  Full Name (I Business or I Name of Ass States in Wh (Check "/ [AL] [IL] [MT] [RI]  Full Name (I Business or I Name of Ass States in Wh (Check "/ [AL]	Residence Adsociated Brokenich Person L All States" or [AK] [NE] [SC]  Last name fir  Residence Adsociated Brokenich Person L All States" or [AK]	st, if individual dress (Number or Dealer isted Has Sol (Number or Dealer Individual dress (Number or Dealer isted Has Sol (AZ)	icited or Inte duals States) [AR] [KS] [NH] [TN]  eer and Street	(CA) (TX) (TX) (TA) (TX)	it Purchasers  [CO]  [LA]  [NM]  [UT]  , Zip Code)	(CT) (ME) (NY) (VT)	[DE] [MD] [NC] [VA]	(DC) [[MA] [ND] [WA]	(FL) (MI) (OH) (WV)	[GA] [MN] [OK] [WI)	[HI] [MS] [OR] [WY]	II States {ID} [MO] [PA] [PR]

4142566\_1.DOC) SEC 1972 (2-97) Page 5 of 10

# C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold.  Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box and and				
	indicate in the columns below the amounts of the securities offered for exchange and already exchanged.  Type of Security	_	gregate ring Price		it Already Sold
	Debt	<b>s</b>	0	: s	· · 0
	Equity	s	0	s'	0
	☐ Common ☐ Preferred				
	Convertible Securities (including warrants)	<b>S</b> 1,	500,000.00	\$ <u>1,</u> 5	500,000.00
	Partnership Interests			s	0
	Other (Specify)			s	0
	Total			S 1.5	500,000.00
	Answer also in Appendix, Column 3, if filing under ULOE.	<u></u>		<u></u>	
	.,				
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."				
		-	lumber ivestors	Dolla	gregate r Amount 'urchase
	Accredited investors		11	\$_1,5	00,000.00
	Non-accredited Investors		0	<b>s</b>	0
	Total (for filings under Rule 504 only)			s	
	Answer also in Appendix, Column 4, if filing under ULOE.		•		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.				
	Type of Offering		Fype of Security	Dolla	r Amount Sold
	Rule 505		•	<b>s</b>	
	Regulation A			<b>s</b>	
	Rule 504	. <u> </u>		\$	
	Total	,		\$	
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.				
	Transfer Agent's Fees	,		\$	
	Printing and Engraving Costs			<b>\$</b>	
	Legal Fees		$\boxtimes$	<b>s</b>	15,000.00
	Accounting Fees			<b>s</b>	
•	Engineering Fees			<b>s</b> _	
	Sales Commissions (specify finders' fees separately)			s	-
	Other Expenses (identify)			<b>s</b>	
	Total		$\boxtimes$	s	15,000.00
			_		

	C. OFFERING PR	ICE, NUMBER OF INVESTORS, EXPENSES AND	USE OF PROCEEDS	
	total expenses furnished in response to Part C - 0	offering price given in response to Part C - Question 1 and Question 4.a. This difference is the "adjusted gross		\$ <u>1,485,000.00</u>
5.	the purposes shown. If the amount for any purpose	proceeds to the issuer used or proposed to be used for each ose is not known, furnish an estimate and check the box to the isted must equal the adjusted gross proceeds to the issuer section.	he set	
			Payments to Officers, Directors & Affiliates	Payments To Others
	Salaries and fees		<b>S</b>	. 🗆 \$
	Purchase of real estate		<b>\$</b>	□ \$
	Purchase, rental or leasing and installation of m	nachinery and equipment	□ \$	□ s
	Construction or leasing of plant buildings and f	acilities	□ \$	<b>\$</b>
	Acquisition of other businesses (including the v used in exchange for the assets or securities of	value of securities involved in this offering that may be another issuer pursuant to a merger)	s	□ \$
	Repayment of indebtedness		□ s	□ s
	Working capital		□ \$	<b>∑ \$</b> 1,485,000.00
	Other (specify):	······································	<b></b> \$	□ s
	Column Totals		<b>\$</b>	<b>\$</b> 1,485,000.00
	Total Payments Listed (column totals adde	ed)	⊠ s <u>1,48</u>	5,000.00
		D. FEDERAL SIGNATURE		
unde	issuer has duly caused this notice to be signed by the ertaking by the issuer to furnish the U.S. Securities a edited investor pursuant to paragraph (b)(2) of Rule	e undersigned duly authorized person. If this notice is filed un and Exchange Commission, upon written request of its staff, 502.	nder Rule 505, the following the information furnished t	s signature constitutes an by the issuer to any non-
Issu	er (Print or Type)		ate	
	Effect, Inc.		ebruary / O , 2008	
	Senders	Title of Signer (Print or Type) Chief Financial Officer		
	1	One Control		
			•	
		ATTENTION		
	Intentional Misstatements or O	missions of Fact Constitute Federal Criminal Violation	 ns. (See 18. U.S.C. 100)	1.)

	E. STATE SIGNATU	RE		
1. Is any party described in 17 CFR 23	0.262 presently subject to any of the disqualification	provisions of such rule?	Yes	No ⊠
	See Appendix, Column 5, for state re	esponse.		
<ol> <li>The undersigned issuer hereby under 239,500) at such times as required by</li> </ol>	ertakes to furnish to any state administrator of any sta ny state law.	te in which this notice is filed, a not	tice on Form D (	17 CFR
3. The undersigned issuer hereby unde	ertakes to furnish to the state administrators, upon wr	itten request, information furnished	by the issuer to	offerees.
	hat the issuer is familiar with the conditions that mus which this notice is filed and understands that the issuate we been satisfied.			_
The issuer has read this notification and lauthorized person.	knows the contents to be true and has duly caused thi	s notice to be signed on its behalf b	y the undersigne	d duly
Issuer (Print or Type)	Signature	Date		<del></del>
NetEffect, Inc.	lob finders	February 10, 2008		
Name of Signer (Print or Type)	Title of Signer (Print or Type)			
Rob Senders	Chief Financial Officer			

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

1		2	3		4			5	
•	Intend (	o sell to	:		Disquali under UL	fication State DE			
	invest St	eredited fors in ate	Type of security and aggregate offering price offered in state		(if yes, explana waiver ( (Part E-	tion of granted			
·	(Part B	ltem 1)	(Part C - Item 1)	Number of	(Part C-I	Number of Non-		(ran e-	item 1)
State	Yes_	No		Accredited Investors	Amount	Accredited Investors	Amount	Yes	No
AL		_							
AK				,					
AZ									
AR		_							
CA		х	Subordinated Convertible Promissory Notes \$1,500,000	4	\$382,135.19	0	\$0.00		x
со									
СТ		, ,							
DE									
DC									
FL									
GA									
HI									
ID									
· IL		x	Subordinated Convertible Promissory Notes \$1,500,000	1	\$138,680.12	0	\$0.00		X
IN									
IA									1
KS									
KY									
LA				·					
ME									
MD									
MA									
MI									
MN	•							,	
MS				-1 - 1					
МО									

· 1		 2	3		4			5		
	Intend to sell to non-accredited investors in State (Part B-Item 1)  Intend to sell to Type of security and aggregate offering price offered in state (Part C – Item 1)				Type of investor and amount purchased in State (Part C-Item 2)					
State	Yes	No		Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No	
MT	163	110		ALLY COLOTS			7111041			
NE	······································	-			_					
NV					_		-			
NH								•		
NJ	_									
NM	<u> </u>									
NY										
NC		1								
ОН									,	
OK			·							
OR	-									
PA		х	Subordinated Convertible Promissory Notes \$1,500,000	2	\$385,381.51	0	0.00		х	
RI										
SC										
SD										
TN										
тх		х	Subordinated Convertible Promissory Notes \$1,500,000	4	\$593,803.18	0	\$0.00		х	
UT										
VT										
VA										
WA	,									
WI										
WY			·							
PR										

